



## AMENDMENT

Application #	09/647,780
Confirmation #	3825
Filing Date	5 October 2000
First Inventor	OUI MET et al.
Art Unit	1652
Examiner	Walicka
Docket #	P06910US00/BAS

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

S I R:

In response to the Office Action dated February 24, 2004:

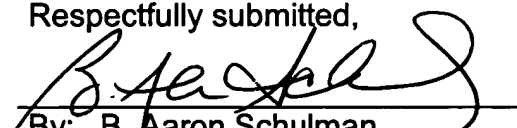
- A) please consider the responsive **Remarks** provided herewith in **Attachment A**; and  
B) please amend the above identified application as follows:

- **Amendments to the Claims** are reflected in the listing of the claims provided herewith in **Attachment B**.

In view of the amendments made and the remarks provided, it is submitted that the present application is in condition for allowance.

Respectfully submitted,

Date: 24 May 2004

  
By: B. Aaron Schulman  
Registration No.: 31,877

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AF-IFW

Customized PTO/SB/21 (04-04)

<b>TRANSMITTAL FORM</b>  (for all correspondence after initial filing)	Application #	09/647,780
	Confirmation #	3825
	Filing Date	5 October 2000
	First Inventor	OUI MET et al.
	Art Unit	1652
	Examiner	Walicka
Total number of pages in this submission =	Docket #	P06910US00/BAS

ENCLOSURES (check all that apply)	
<input type="checkbox"/> Fees calculated below	<input type="checkbox"/> Response to Missing Parts/Incomplete Appl.
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input checked="" type="checkbox"/> including Attachment(s)	<input type="checkbox"/> Information Disclosure Statement
<input type="checkbox"/> After Final Amendment/Reply	<input type="checkbox"/> Drawing(s)
<input type="checkbox"/> including Attachment(s)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Extension of Time Petition	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

FEES CALCULATION: For claims if required and/or other fees as shown below:					
	NOW	Previously Paid For	Present Extra	Rate	\$
<input type="checkbox"/> TOTAL CLAIMS	13	20	0	X \$ 18 =	
<input type="checkbox"/> INDEP. CLAIMS	3	3	0	X \$ 86 =	
TOTAL OF ABOVE CLAIMS FEES =					
<input type="checkbox"/> Reduction by 1/2 for <b>small entity status</b> of applicant					
SUBTOTAL =					
<input type="checkbox"/> Fee for extension of time (per attached Petition)					
<input type="checkbox"/> Other fee for					
TOTAL OF ALL FEES =					<b>-0-</b>

☒ A CREDIT CARD PAYMENT FORM (PTO-2038) in the amount of \$ -0- is enclosed. If no payment or an insufficient payment is enclosed and a fee is due in connection herewith, the Commissioner is authorized to charge any fee or additional fee due in connection herewith to Deposit Account No. 12-0555.

☒ In the event that a petition for extension of time is required to be submitted herewith and that a separate petition is not submitted herewith, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely. Any fee is authorized above.

Date: 24 May 2004

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